

WHAT'S HAPPENING WEDNESDAY

Kansas Immunization Program

September 2, 2020

VFC Consultant On-Call

The Consultant On-Call can be reached Monday—Friday, 8 a.m.—5 p.m. at 785-296-5592.



CHIEF CHAT

On August 20, 2020 the Centers for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report (MMWR) released the [National, Regional, State, and Selected Local Area Vaccination Coverage Among Adolescents Aged 13–17 Years — United States, 2019](#).

The NIS-Teen is a random telephone survey that is conducted annually to monitor vaccination coverage among 13-17 year old adolescents in the 50 states, the District of Columbia, and selected local areas, and U.S. territories.

The three vaccines that are routinely recommended for adolescents include tetanus, diphtheria and acellular pertussis (Tdap), meningococcal ACWY, (MenACWY) and human papillomavirus (HPV). Highlights for Kansas include:

Tdap:

- Coverage is 91.9%, which is above the Healthy People 2020 goal of 90%. Kansas ranks 19th among states.

MenACWY:

- Coverage has increased from 75.3% to 80.7%, while still below national average it has surpassed the Healthy People 2020 goal of 80%.

HPV:

- Coverage for 1 or more doses of HPV is 66% statewide; 70% males, 62% females.
- Up-to-date coverage for HPV 50% statewide, 52% males, 47% females, well below Healthy People 2020 goal of 80%.
- Kansas still ranks low especially for female coverage (49th for at least 1 dose females)

Please take the time to read this report and learn more. Stay safe!



In This Issue

Chief Chat

Page 1

Injection of Education

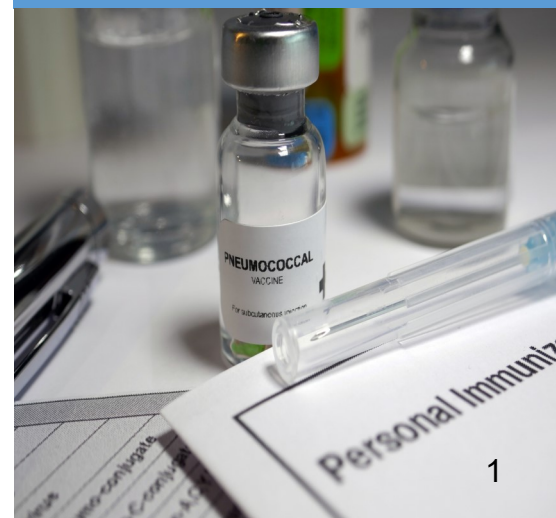
Page 2

Injection of Education-Cont. Flu Distribution

Page 3

VAERS Reporting Vaccine Doses KS WebIZ

Page 4





INJECTION OF EDUCATION

The Centers for Disease Control and Prevention (CDC) recently released the [Advisory Committee on Immunization Practices 2020 – 2021 Influenza Recommendations](#) in the Morbidity and Mortality Weekly Report (MMWR).

Receiving a flu vaccine is more important now more than ever. Flu vaccines, even if they are not a perfect match, can help reduce the length and severity of influenza illness. This, in turn, will help reduce the overall burden on our healthcare systems as flu season begins and COVID-19 continues. The CDC recommends that all persons, 6 months and older without contraindications, receive a flu vaccine.

As you begin to prepare for flu clinics, do you have standing orders in place? [Standing orders](#) allow medical staff to provide immunizations according to specific, written protocols. If your practice setting does not use standing orders, the Immunization Action Coalition (IAC) has a [guide](#) to help get you started. The IAC has Influenza standing orders specific to [children and teens](#), and [adults](#).

There are many different presentations of flu vaccine available. Some are for use in anyone 6 months or older, some are for ≥ 4 years, ≥ 18 years, or ≥ 65 years. It is important that staff be familiar with different presentations and age indications to prevent vaccine administration errors.

Changes to this year's flu vaccine:

- Quadrivalent vaccine formulation includes changes to the A(H1N1), A(H3N2), and influenza B/Victoria lineage components. The B/Yamagata lineage is unchanged.
- Fluzone High-Dose Quadrivalent was approved for use for those 65 years and older. The dose volume will be 0.7 mL, whereas the trivalent was 0.5 mL.
- Fluvad Quadrivalent was also approved for use for those 65 years and older and was also previously trivalent.

Contraindication and precaution changes include:

- Additional contraindications and precautions with Flu Mist (LAIV 4).
- Use of antiviral medications with Flu Mist.
- Additional precautions for those with severe allergic reactions to eggs.

Injection Of Education (Continued)

The MMWR also discusses when to begin flu campaigns, while balancing waning influenza protection with the challenges caused by COVID-19.

These are just a few of the things found in the MMWR. We encourage you to take a few minutes to read and familiarize yourself and your staff with the 2020-2021 influenza recommendations.

As a final note, if your practice uses flu vaccine from a multi dose vial, review the product's [package insert](#) prior to use. Doses drawn up from a multi-dose vial should not exceed the number of doses indicated in the manufacturer's instructions, even if doses remain. If using Afluria, multi dose vials should also be discarded 28 days after opening. When clinic staff members are administering flu vaccines from a multi dose vial, a good tip is to mark the box with hashmarks or tally marks (||||), so you can track how many times the vial has been entered.

Thank you for all you do!

Flu Distribution

As you know the Kansas Immunization Program (KIP) pre-books influenza vaccines for VFC providers in late winter for the next flu season. However, pre-booked flu vaccine does not mean that your clinic will receive it right away in the flu season. Throughout the flu season, the KIP receives multiple flu allocations with a report that tells us how much vaccine was pre-booked, how much is available, and how much we have distributed at the time of the report.

The KIP checks the flu allocation daily and distributes flu vaccine as quickly as possible but not before we have received 25%-30% of the total allocation. For large flu orders, the KIP will contact the clinic to ensure adequate storage capacity before shipping it out. These communications will occur through email so be sure to check emails frequently if you are the primary or secondary contact for your clinic. Smaller orders simply get placed without contacting anybody, so do not be surprised if flu just shows up at your location.

Currently, we have all of our Flumist vaccine in and almost all of it has been distributed. We have 40-50% of the VFC pre-booked totals for Fluarix and Flulaval as of 8/31/2020 and orders are being processed. The KIP has not received any of the Fluzone that was pre-booked, but we will send it out as soon as it becomes available.

For the next wave of orders for those that have already received flu vaccines, 317 and state vaccine will be distributed to those who ordered it. If you happen to be running low on a particular flu vaccine, email the Vaccine Coordinator at brad.carpenter@ks.gov so that we can work to get you what you need.

VAERS Reporting

CDC and FDA work together to manage the Vaccine Adverse Event Reporting System (VAERS), a vaccine safety monitoring system. Anyone- patients, parents, healthcare providers, and vaccine manufactures- can and is encouraged to report an adverse event to VAERS. Completing a VAERS report is a simple process that provides valuable information to ensure the continued safety of vaccines.

Healthcare providers are required by law to report adverse events listed by vaccine manufactures as contraindications to further doses of the vaccine or any adverse event listed in the [VAERS Table of Reportable Events](#). While each vaccine has specific related adverse events, these events are always reportable if they occur within 7 days after a vaccination: vasovagal syncope and shoulder injury related to vaccine administration. VAERS also serves as a continuous monitoring system for vaccine safety. Healthcare providers are also encouraged to report vaccine administration errors and any adverse events that occur after a licensed vaccine is administered even if its unclear whether the vaccine caused the event. While it is important to take the time to avoid vaccine administration errors, humans make mistakes. Using VAERS to report vaccine administration errors allows for persistent administration errors to be identified.

VAERS encourages online reporting at [Report an Adverse Event to VAERS](#). While more information is appreciated, reports at minimum require patient age, date of birth, and sex; vaccine brand name and dosage; date, time and location administered; date and time when adverse event(s) started; symptoms and outcome of adverse events; and applicable physician contact information and medical tests. A [VAERS checklist](#) contains all accepted fields in a VAERS report and can be used to make sure all data elements are identified.

Vaccine Doses

July is normally a major month for vaccinations. During July 2020, 38,303 VFC doses were ordered; this represents 97% of the vaccines ordered in July 2019. This is the closest that vaccine ordering has matched 2019 since the pandemic started. Using KSWebIZ data, 81,468 doses were administered in July 2020 which had increased from the 74,702 administered in June 2020. While this increase in doses administered is exciting, it is only 77% of the doses that were administered in July 2019.

KSWebIZ

With the update of KSWebIZ to 20.6 there has been a change to the way VFC Change of information works. There is now a remove staff function that you will need to do, so that the current person in that role can be removed. After the remove contact has been submitted you will then need to submit a new contact for that position by using the "Add New Contact" option. Full instructions can be found in KSWebIZ on the Reports page under the Documents tab. If you have any question feel free to contact the KSWebIZ Help Desk or the Regional Immunization Consultant for your area.